Application or Docket Number													- *			
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 10/643, 156																
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY						
TOTAL CLAIMS								ŔATE	FEE]	RATE	FEE				
FOR			NUMBER FILED NUMBER EXTRA			REXTRA	BA	ASIC FEE	355.00	OR	BASIC FEE	710.00				
TOTAL CHARGEABLE CLAIMS			minus 20=					X\$ 9=		OR	X\$18=	Č.				
INDÉPENDENT CLAIMS			minus 3 =					X40=		OR	X80=					
MULTIPLE DEPENDENT CLAIM PRESE								+135=	· · · · · · · · · · · · · · · · · · ·	OR	+270=					
* If the difference in column 1 is less than zero, enter "0" in column 2						L	OTAL		OR		7.162					
CLAIMS AS AMENDED - PART II							•	O'AL	:	Jon		THAN	ifi to te			
(Column 1) (Column 2) (Column 3)								MALL E	ENTITY	OR	SMALL					
NT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	R SLY	PRESENT EXTRA		RATE	ADDI- PIONAL FEE		RATE T	ADDI- TIONAL FEE	Ċ			
AMENDMENT	Total	. 17	Minus	Je	5]-	-		X\$ 9=	1:	OR	X\$18=		11/17/22			
MEN	Independent	.6	Minus	ka	4	-2		X40=	200.00	OR	X80=	/				
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT CI	AIM			⊦135=	S 0	[S]	+270=	O: C = 10	JETIPLE DIS			
							Ľ	TOTAL	100 00	OR	TOTAL					
						0-1 0\	AD	DIT. FEE	Jov.co	OR	ADDIT. FEE	L				
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column HIGHES NUMBER PREVIOUS PAID FO	T R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	Ó.	RATE F	CLADDI- TIONAL				
Ž	Total	•	Minus	**		=		X\$ 9=	Ho In	ΘR	X\$18=		į įVanus			
AME	Independent	•	Minus	•••				X40=	Hi - I In	1	^{⊴≘} X80≟		ivatius			
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	1. 161	OR	+270=	110K GE IV	ULTAPLE DE			
		٠					Ļ	TOTAL	!	OR.	TOTAL		i			
				(0.1	0) (O-1	AD	DIT. FEE		10	ADDIT. FEE					
AMENDMENT C		(Column 1) CLAIMS		(Column HIGHES	1	Column 3)	_		ADDI-	1	((Column 1)				
		REMAINING AFTER AMENDMENT	Last Carlot	NUMBER PREVIOUS PAID FO	SLY	PRESENT EXTRA	1	RATE	TIONAL FEB		RATE	TIONAL	j.			
	Total		Minus	••		=		X\$ 9=	The ITO	ÖR	X\$1 8 =	7	ikinus			
	Independent	•	Minus			=		X40= ·	iii. in	eper OR	^{ian} X80≟		Minus			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							- 135=		KST !	+270=	1000	DO BJOHOLEUR			
1. If the cottagin polyment in loca than the cottagin column 2. Write W in column 3.												on collectia esti.				
***	"If the "Lilahaet Nice	mhar Provincety P	bid For IN TH	IS SPACE is le	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** ADDIT. FEE OR ADDIT. FEE OR The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											